



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:)	
Paul K. Klissner)	Docket No: SUNMP607
Application No: 09/981,137)	
Filed: October 16, 2001)	Examiner: Ray, Gopal C.
For: APPARATUS AND METHOD FOR)	
CONFIGURING AN EXTERNAL DEVICE)	Group Art Unit: 2111
<u>(PREVIOUSLY AMENDED)</u>)	
)	Date: December 8, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on December 8, 2004.

Signed: _____

Sylvia Castillo
Sylvia Castillo

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This Amendment is in response to the Office Action mailed on October 8, 2004. The period of response extends to December 8, 2004. Please enter the following amendments and remarks in the above-identified patent application:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT

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JW

In re application of:
Paul K. KLISNER

Application No.: 09/981,137

Filed: October 16, 2001

For: APPARATUS AND METHOD FOR CONFIGURING
AN EXTERNAL DEVICE (PREVIOUSLY AMENDED)

Attorney Docket No.: SUNMP607

Examiner: Ray, Gopal C.

Group Art Unit: 2111

Date: December 8, 2004

☐ Duplicate for
fee processing

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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for Patents, Alexandria, VA 22313-1450 on December 8, 2004.

Signed:

Sylvia Castillo

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
TOTAL CLAIMS	17 -	21	0	X09 = \$	OR	X18 = \$0
INDEP CLAIMS	04 -	05	0	X43 = \$	OR	X86 = \$0
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$145		\$290
			TOTAL	\$		\$0

- ☐ Applicant(s) hereby petition for a _____ month(s) extension of time to respond to the outstanding Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0805.
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-0805 (Order No. SUNMP607). A copy of this sheet is enclosed.

Respectfully submitted,
MARTINE & PENILLA, LLP

Jaya Nair, Esq.

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